

**SCHEDULE H  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Hospitals**

- **Complete if the organization answered "Yes" on Form 990, Part IV, question 20.**  
 ► **Attach to Form 990.**  
 ► **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization

PARKVIEW HOSPITAL, INC.

Employer identification number

35-0868085

**Part I Financial Assistance and Certain Other Community Benefits at Cost**

	Yes	No
<b>1a</b> Did the organization have a financial assistance policy during the tax year? If "No," skip to question 6a .....	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," was it a written policy? .....	<input checked="" type="checkbox"/>	
<b>2</b> If the organization had multiple hospital facilities, indicate which of the following best describes application of the financial assistance policy to its various hospital facilities during the tax year. <input checked="" type="checkbox"/> Applied uniformly to all hospital facilities <input type="checkbox"/> Applied uniformly to most hospital facilities <input type="checkbox"/> Generally tailored to individual hospital facilities		
<b>3</b> Answer the following based on the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year.		
<b>a</b> Did the organization use Federal Poverty Guidelines (FPG) as a factor in determining eligibility for providing <i>free</i> care? If "Yes," indicate which of the following was the FPG family income limit for eligibility for free care: ..... <input type="checkbox"/> 100% <input type="checkbox"/> 150% <input checked="" type="checkbox"/> 200% <input type="checkbox"/> Other _____ %	<input checked="" type="checkbox"/>	
<b>b</b> Did the organization use FPG as a factor in determining eligibility for providing <i>discounted</i> care? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care: ..... <input type="checkbox"/> 200% <input checked="" type="checkbox"/> 250% <input type="checkbox"/> 300% <input type="checkbox"/> 350% <input type="checkbox"/> 400% <input type="checkbox"/> Other _____ %	<input checked="" type="checkbox"/>	
<b>c</b> If the organization used factors other than FPG in determining eligibility, describe in Part VI the criteria used for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care.		
<b>4</b> Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"? .....	<input checked="" type="checkbox"/>	
<b>5a</b> Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year? .....	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," did the organization's financial assistance expenses exceed the budgeted amount? .....		<input checked="" type="checkbox"/>
<b>c</b> If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligible for free or discounted care? .....		
<b>6a</b> Did the organization prepare a community benefit report during the tax year? .....	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," did the organization make it available to the public? .....	<input checked="" type="checkbox"/>	

Complete the following table using the worksheets provided in the Schedule H instructions. Do not submit these worksheets with the Schedule H.

**7 Financial Assistance and Certain Other Community Benefits at Cost**

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
<b>Financial Assistance and Means-Tested Government Programs</b>						
<b>a</b> Financial Assistance at cost (from Worksheet 1) .....			14313701.		14313701.	1.07%
<b>b</b> Medicaid (from Worksheet 3, column a) .....			143178101	104894356	38283745.	2.86%
<b>c</b> Costs of other means-tested government programs (from Worksheet 3, column b) .....			134298000	112434082	21863918.	1.63%
<b>d Total.</b> Financial Assistance and Means-Tested Government Programs .....			291789802	217328438	74461364.	5.56%
<b>Other Benefits</b>						
<b>e</b> Community health improvement services and community benefit operations (from Worksheet 4) .....			10755295.	3297643.	7457652.	.56%
<b>f</b> Health professions education (from Worksheet 5) .....			10135391.	1969519.	8165872.	.61%
<b>g</b> Subsidized health services (from Worksheet 6) .....			79178651.	66126463.	13052188.	.98%
<b>h</b> Research (from Worksheet 7) .....			1119420.	443,339.	676,081.	.05%
<b>i</b> Cash and in-kind contributions for community benefit (from Worksheet 8) .....			1256344.		1256344.	.09%
<b>j Total.</b> Other Benefits .....			102445101	71836964.	30608137.	2.29%
<b>k Total.</b> Add lines 7d and 7j .....			394234903	289165402	105069501	7.85%





**Part V Facility Information** (continued)**Section B. Facility Policies and Practices**

(complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

Name of hospital facility or letter of facility reporting group PARKVIEW HOSPITAL, INC.

Line number of hospital facility, or line numbers of hospital

facilities in a facility reporting group (from Part V, Section A): 1

	Yes	No
<b>Community Health Needs Assessment</b>		
<b>1</b> Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year? .....		X
<b>2</b> Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C .....		X
<b>3</b> During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If "No," skip to line 12 .....	X	
If "Yes," indicate what the CHNA report describes (check all that apply):		
<b>a</b> <input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
<b>b</b> <input checked="" type="checkbox"/> Demographics of the community		
<b>c</b> <input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
<b>d</b> <input checked="" type="checkbox"/> How data was obtained		
<b>e</b> <input checked="" type="checkbox"/> The significant health needs of the community		
<b>f</b> <input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
<b>g</b> <input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
<b>h</b> <input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
<b>i</b> <input checked="" type="checkbox"/> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)		
<b>j</b> <input type="checkbox"/> Other (describe in Section C)		
<b>4</b> Indicate the tax year the hospital facility last conducted a CHNA: <u>20 19</u>		
<b>5</b> In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted .....	X	
<b>6a</b> Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C .....	X	
<b>b</b> Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C .....	X	
<b>7</b> Did the hospital facility make its CHNA report widely available to the public? .....	X	
If "Yes," indicate how the CHNA report was made widely available (check all that apply):		
<b>a</b> <input checked="" type="checkbox"/> Hospital facility's website (list url): <u>HTTPS://WWW.PARKVIEW.COM/LOCALHEALTHNEEDS</u>		
<b>b</b> <input type="checkbox"/> Other website (list url): .....		
<b>c</b> <input checked="" type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
<b>d</b> <input type="checkbox"/> Other (describe in Section C)		
<b>8</b> Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11 .....	X	
<b>9</b> Indicate the tax year the hospital facility last adopted an implementation strategy: <u>20 19</u>		
<b>10</b> Is the hospital facility's most recently adopted implementation strategy posted on a website? .....	X	
<b>a</b> If "Yes," (list url): <u>HTTPS://WWW.PARKVIEW.COM/LOCALHEALTHNEEDS</u>		
<b>b</b> If "No," is the hospital facility's most recently adopted implementation strategy attached to this return? .....		
<b>11</b> Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
<b>12a</b> Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)? .....		X
<b>b</b> If "Yes" to line 12a, did the organization file Form 4720 to report the section 4959 excise tax? .....		
<b>c</b> If "Yes" to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$		

**Part V Facility Information** (continued)**Financial Assistance Policy (FAP)**Name of hospital facility or letter of facility reporting group PARKVIEW HOSPITAL, INC.

	Yes	No
Did the hospital facility have in place during the tax year a written financial assistance policy that:		
<b>13</b> Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? .....	<b>13</b> X	
If "Yes," indicate the eligibility criteria explained in the FAP:		
a <input checked="" type="checkbox"/> Federal poverty guidelines (FPG), with FPG family income limit for eligibility for free care of <u>200</u> % and FPG family income limit for eligibility for discounted care of <u>250</u> %		
b <input type="checkbox"/> Income level other than FPG (describe in Section C)		
c <input checked="" type="checkbox"/> Asset level		
d <input checked="" type="checkbox"/> Medical indigency		
e <input checked="" type="checkbox"/> Insurance status		
f <input checked="" type="checkbox"/> Underinsurance status		
g <input checked="" type="checkbox"/> Residency		
h <input type="checkbox"/> Other (describe in Section C)		
<b>14</b> Explained the basis for calculating amounts charged to patients? .....	<b>14</b> X	
<b>15</b> Explained the method for applying for financial assistance? .....	<b>15</b> X	
If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):		
a <input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of his or her application		
b <input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of his or her application		
c <input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
d <input type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
e <input type="checkbox"/> Other (describe in Section C)		
<b>16</b> Was widely publicized within the community served by the hospital facility? .....	<b>16</b> X	
If "Yes," indicate how the hospital facility publicized the policy (check all that apply):		
a <input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>SEE PART V, PAGE 8</u>		
b <input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>SEE PART V, PAGE 8</u>		
c <input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>SEE PART V, PAGE 8</u>		
d <input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
e <input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
f <input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
g <input checked="" type="checkbox"/> Individuals were notified about the FAP by being offered a paper copy of the plain language summary of the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention		
h <input checked="" type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
i <input checked="" type="checkbox"/> The FAP, FAP application form, and plain language summary of the FAP were translated into the primary language(s) spoken by Limited English Proficiency (LEP) populations		
j <input type="checkbox"/> Other (describe in Section C)		

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**Part V Facility Information** (continued)**Billing and Collections**Name of hospital facility or letter of facility reporting group PARKVIEW HOSPITAL, INC.

	Yes	No	
<b>17</b> Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial assistance policy (FAP) that explained all of the actions the hospital facility or other authorized party may take upon nonpayment? .....	<b>17</b>	<b>X</b>	
<b>18</b> Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP:			
a <input type="checkbox"/> Reporting to credit agency(ies)			
b <input type="checkbox"/> Selling an individual's debt to another party			
c <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP			
d <input type="checkbox"/> Actions that require a legal or judicial process			
e <input type="checkbox"/> Other similar actions (describe in Section C)			
f <input checked="" type="checkbox"/> None of these actions or other similar actions were permitted			
<b>19</b> Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? .....	<b>19</b>		<b>X</b>
If "Yes," check all actions in which the hospital facility or a third party engaged:			
a <input type="checkbox"/> Reporting to credit agency(ies)			
b <input type="checkbox"/> Selling an individual's debt to another party			
c <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP			
d <input type="checkbox"/> Actions that require a legal or judicial process			
e <input type="checkbox"/> Other similar actions (describe in Section C)			
<b>20</b> Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) in line 19 (check all that apply):			
a <input checked="" type="checkbox"/> Provided a written notice about upcoming ECAs (Extraordinary Collection Action) and a plain language summary of the FAP at least 30 days before initiating those ECAs (if not, describe in Section C)			
b <input checked="" type="checkbox"/> Made a reasonable effort to orally notify individuals about the FAP and FAP application process (if not, describe in Section C)			
c <input checked="" type="checkbox"/> Processed incomplete and complete FAP applications (if not, describe in Section C)			
d <input checked="" type="checkbox"/> Made presumptive eligibility determinations (if not, describe in Section C)			
e <input type="checkbox"/> Other (describe in Section C)			
f <input type="checkbox"/> None of these efforts were made			

**Policy Relating to Emergency Medical Care**

<b>21</b> Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy? .....	<b>21</b>	<b>X</b>	
If "No," indicate why:			
a <input type="checkbox"/> The hospital facility did not provide care for any emergency medical conditions			
b <input type="checkbox"/> The hospital facility's policy was not in writing			
c <input type="checkbox"/> The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Section C)			
d <input type="checkbox"/> Other (describe in Section C)			

**Part V Facility Information** (continued)**Charges to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)**Name of hospital facility or letter of facility reporting group PARKVIEW HOSPITAL, INC.**22** Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care.

- a** ☐ The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period
- b** ☒ The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period
- c** ☐ The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period
- d** ☐ The hospital facility used a prospective Medicare or Medicaid method

**23** During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care? .....

If "Yes," explain in Section C.

**24** During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual? .....

If "Yes," explain in Section C.

	Yes	No
<b>23</b>		<b>X</b>
<b>24</b>		<b>X</b>

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**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

PARKVIEW HOSPITAL, INC.:

PART V, SECTION B, LINE 5: DESCRIBE HOW THE HOSPITAL FACILITY TOOK INTO ACCOUNT INPUT FROM PERSONS WHO REPRESENT THE COMMUNITY, AND IDENTIFY THE PERSONS THE HOSPITAL FACILITY CONSULTED:

WHEN CONDUCTING ITS 2019 CHNA, PARKVIEW HOSPITAL, INC. AND THE INDIANA PARTNERSHIP FOR HEALTHY COMMUNITIES (IN-PHC) RESEARCH TEAM WERE DILIGENT IN ENSURING THE INPUT FROM PERSONS REPRESENTING THE BROAD INTERESTS OF THE COMMUNITY AS WELL AS VULNERABLE AND UNDERSERVED POPULATIONS WERE CONSIDERED. LOCAL HEALTH DEPARTMENTS, MEDICAL PROFESSIONALS AND SOCIAL SERVICE AGENCIES THAT PROVIDE SERVICES DIRECTLY TO THE UNDERSERVED IN OUR COMMUNITIES WERE SURVEYED AND TOOK PART IN COMMUNITY HEALTH PLANNING SESSIONS.

IN GATHERING QUALITATIVE COMMUNITY INPUT, PARKVIEW HOSPITAL, INC. AND ITS RESEARCH PARTNERS OBTAINED THE FOLLOWING:

1. PRIMARY DATA COLLECTED VIA AN ONLINE SURVEY (JANUARY 2019) OF PARKVIEW HEALTH SYSTEM, INC. HEALTHCARE PROVIDERS (E.G., PHYSICIANS, NURSES, SOCIAL WORKERS, ETC.) AND COMMUNITY SERVICE PROVIDERS REPRESENTING ALLEN COUNTY'S VULNERABLE POPULATIONS. THE HEALTH SYSTEM'S CHNA RESEARCH PARTNERS ALSO CONDUCTED A RANDOMIZED SURVEY OF THE COMMUNITY RESIDENTS IN EACH COUNTY WHERE AFFILIATE HOSPITALS RESIDE (FEBRUARY - APRIL 2019). IN AN EFFORT TO MEET THE NEEDS OF A SPECIFIC RURAL POPULATION, A PAPER VERSION OF THE SURVEY WAS ADMINISTERED TO THE AMISH POPULATION LOCATED IN LAGRANGE COUNTY (FEBRUARY - APRIL 2019), AND A HISPANIC FOCUS GROUP WAS HELD IN KOSCIUSKO



**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

COUNTY (MARCH 24, 2019).

2. SECONDARY DATA GATHERED FROM CONDUENT'S HEALTHY COMMUNITIES INSTITUTE (HCI) PLATFORM AND OTHER LOCAL AND NATIONAL AGENCIES, EMPHASIZING THE SOCIAL AND ENVIRONMENTAL FACTORS CONTRIBUTING TO LOCAL HEALTH DISPARITIES.

IN ADDITION TO DATA COLLECTION, PARKVIEW HOSPITAL, INC. TURNED TO THE COMMUNITY AND PARTNERING ORGANIZATIONS REPRESENTING VULNERABLE POPULATIONS WHEN SELECTING AND PRIORITIZING ALLEN COUNTY'S HEALTH NEEDS. THREE COMMUNITY SESSIONS BETWEEN AUGUST 26, 2019 AND SEPTEMBER 4, 2019 WERE HELD TO SHARE THE PARKVIEW'S CHNA RESULTS AND GATHER FEEDBACK FROM THESE LOCAL NON-PROFIT ORGANIZATIONS. IN EACH COMMUNITY ENGAGEMENT MEETING, PARTICIPANTS WORKED IN SMALL GROUPS TO COMPLETE A "ROADMAP" OUTLINING THEIR VISION FOR OUR COMMUNITY, POTENTIAL INTERVENTIONS, BARRIERS AND OTHER FACTORS RELATED TO THE HOSPITAL'S THREE HEALTH PRIORITIES. THE FEEDBACK GATHERED FROM THE COMMUNITY SESSIONS WAS USED IN CREATING OUR IMPLEMENTATION STRATEGY.

FOR THE 2019 CHNA, A MODIFIED HANLON METHOD WAS USED TO PRIORITIZE HEALTH CONCERNS FOR THE COMMUNITIES PARKVIEW SERVES. THIS METHOD, ALSO KNOWN AS THE BASIC PRIORITY RATING SYSTEM (BPRS) 2.0, IS RECOMMENDED BY THE NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICIALS (NACCHO) FOR PRIORITIZING COMMUNITY HEALTH NEEDS (GUIDE-TO-PRIORITIZATION-TECHNIQUES.PDF, N.D.). ALTHOUGH COMPLEX TO IMPLEMENT, IT IS USEFUL WHEN THE DESIRED OUTCOME IS AN OBJECTIVELY SELECTED LIST. EXPLICIT IDENTIFICATION OF FACTORS MUST BE CONSIDERED TO SET PRIORITIES, WHICH ENABLES A TRANSPARENT AND REPLICABLE PROCESS.

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

PRIORITY SCORES ARE CALCULATED BASED ON THE SIZE OF THE HEALTH PROBLEM, SERIOUSNESS OF THE HEALTH PROBLEM AND THE AVAILABILITY OF EFFECTIVE HEALTH INTERVENTIONS.

THE INDIANA PARTNERSHIP FOR HEALTHY COMMUNITIES PRESENTED AN OVERVIEW OF THE REGIONAL CHNA FINDINGS ON JULY 16, 2019, TO ATTENDEES REPRESENTING PARKVIEW HEALTH SYSTEM, INC. IN TOTAL, OVER 60 INDIVIDUALS PARTICIPATED IN THE PRIORITIZATION PROCESS, INCLUDING REPRESENTATIVES FROM HOSPITAL SERVICE LINES, COMMUNITY HOSPITALS, HEALTHCARE PROVIDERS/PHYSICIANS, EXECUTIVE LEADERSHIP TEAM, COMMUNITY HEALTH AND HOSPITAL BOARD OF DIRECTORS. AFTER A THOROUGH REVIEW OF THE DATA AND CONSIDERABLE DISCUSSION, THE GROUP USED AN ELECTRONIC VOTING SYSTEM TO RANK THE VARIOUS HEALTH NEEDS IDENTIFIED IN THE CHNA. ULTIMATELY, THE GROUP VOTED ON SUBSTANCE USE DISORDER/MENTAL HEALTH AS THE SHARED HEALTH PRIORITY ACROSS THE HEALTH SYSTEM.

AS A CONTINUATION OF THE PRIORITIZATION PROCESS, PARKVIEW HOSPITAL, INC. (ALLEN COUNTY) FORMED AN INTERNAL, MULTIDISCIPLINARY ADVISORY COUNCIL TO SELECT ADDITIONAL HEALTH PRIORITIES FOR PARKVIEW HOSPITAL, INC. THIS GROUP OF STAKEHOLDERS MET ON AUGUST 16, 2019 AND DISCUSSED THE RESULTS OF THE CHNA. AFTER A THOUGHTFUL REVIEW OF THE DATA AND EXTENSIVE DISCUSSION, THE ADVISORY COMMITTEE SELECTED MATERNAL/CHILD HEALTH AND CARDIOVASCULAR DISEASE/DIABETES AS ADDITIONAL PRIORITIES. PARKVIEW THEN HELD THE THREE AFOREMENTIONED COMMUNITY ENGAGEMENT SESSIONS.

HEALTH PRIORITIES WERE PRESENTED AND ADOPTED ON NOVEMBER 6, 2019, BY PARKVIEW HOSPITAL'S COMMUNITY HEALTH IMPROVEMENT COMMITTEE, A COMMITTEE OF

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

THE PARKVIEW HOSPITAL, INC. BOARD OF DIRECTORS.

PARKVIEW HOSPITAL, INC.:

PART V, SECTION B, LINE 6A: THE HOSPITAL FACILITY'S CHNA WAS CONDUCTED WITH THE FOLLOWING HOSPITAL FACILITIES:

COMMUNITY HOSPITAL OF LAGRANGE COUNTY, INC. (EIN 20-2401676); COMMUNITY HOSPITAL OF NOBLE COUNTY, INC. (EIN 35-2087092); HUNTINGTON MEMORIAL HOSPITAL, INC. (EIN 35-1970706); WHITLEY MEMORIAL HOSPITAL, INC. (EIN 35-1967665); PARKVIEW WABASH HOSPITAL, INC. (EIN 47-1753440) AND ORTHOPAEDIC HOSPITAL AT PARKVIEW NORTH, LLC (EIN 26-0143823).

PARKVIEW HOSPITAL, INC.:

PART V, SECTION B, LINE 6B: THE HOSPITAL FACILITY'S CHNA WAS ALSO CONDUCTED WITH THE FOLLOWING ORGANIZATIONS OTHER THAN HOSPITAL FACILITIES:

PARKVIEW HEALTH SYSTEM, INC.; INDIANA PARTNERSHIP FOR HEALTHY COMMUNITIES (A PARTNERSHIP BETWEEN THE INDIANA UNIVERSITY RICHARD M. FAIRBANKS SCHOOL OF PUBLIC HEALTH AND THE POLIS CENTER AT IUPUI) AND CONDUENT HEALTHY COMMUNITIES INSTITUTE.

PARKVIEW HOSPITAL, INC.:

PART V, SECTION B, LINE 11: DESCRIBE HOW THE HOSPITAL FACILITY IS ADDRESSING THE SIGNIFICANT NEEDS IDENTIFIED IN ITS MOST RECENTLY CONDUCTED

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

CHNA AND ANY SUCH NEEDS THAT ARE NOT BEING ADDRESSED TOGETHER WITH THE  
REASONS WHY SUCH NEEDS ARE NOT BEING ADDRESSED:

SIGNIFICANT HEALTH NEEDS BEING ADDRESSED:

UPON COMPLETION OF THE 2019 CHNA, PARKVIEW HOSPITAL, INC. AND PARTNERING  
COMMUNITY ORGANIZATIONS IDENTIFIED THE FOLLOWING AS ALLEN COUNTY'S TOP  
HEALTH CONCERNS: SUBSTANCE USE DISORDER/MENTAL HEALTH; CARDIOVASCULAR  
DISEASE AND DIABETES; AND MATERNAL/CHILD HEALTH. WHILE THE NEEDS OF ALLEN  
COUNTY HAVE EVOLVED SINCE 2016, THE NEEDS OF 2019 ARE STILL VERY SIMILAR.  
FOR EXAMPLE:

- 2016 OBESITY VS. 2019 CARDIOVASCULAR DISEASE AND DIABETES
- 2016 MENTAL HEALTH VS. 2019 SUBSTANCE USE DISORDER AND MENTAL HEALTH
- 2016 AND 2019 MATERNAL/CHILD HEALTH

DUE TO THE SIMILARITY, PARKVIEW HOSPITAL, INC. PLANS TO CONTINUE BUILDING  
UPON THE HEALTH INITIATIVES THAT BEGAN AFTER THE 2016 CHNA WHILE  
ADDRESSING ADDITIONAL PRIORITIES IDENTIFIED ON THE 2019 CHNA. IN RESPONSE  
TO THE 2019 CHNA, PARKVIEW HOSPITAL, INC. CREATED AN IMPLEMENTATION  
STRATEGY (POSTED MAY 2020), WHICH PROVIDES A COMPREHENSIVE SUMMARY OF THE  
HOSPITAL'S CURRENT PLANNED HEALTH PROMOTION INITIATIVES. IN SUMMATIVE  
FORM, THE IMPLEMENTATION STRATEGY REPORTED THE FOLLOWING FOR EACH DEFINED  
HEALTH CONCERN TO BE ADDRESSED:

SUBSTANCE USE DISORDER/MENTAL HEALTH - TO ADDRESS SUBSTANCE USE  
DISORDER/MENTAL HEALTH, PARKVIEW HOSPITAL, INC. WITH SUPPORT FROM THE  
PARKVIEW BEHAVIORAL HEALTH INSTITUTE, DEFINED THREE GOALS SPECIFIC TO THE

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

**NEEDS OF ALLEN COUNTY:**

1) REDUCE THE NUMBER OF OPIOID OVERDOSES AND DEATHS DUE TO OVERDOSE IN ALLEN COUNTY. TO ACHIEVE THIS GOAL, PARKVIEW HOSPITAL, INC. WILL BACK A PEER SUPPORT PROGRAM THAT PARTNERS PEOPLE WITH A RECOVERY COACH WHO SEEKS TO DEVELOP AN INDIVIDUALIZED PERSONAL SUPPORT AND RECOVERY PLAN.

2) REDUCE THE NUMBER OF PRE-TERM BIRTHS DUE TO SUBSTANCE USE IN ALLEN COUNTY. TO ADDRESS ITS SECOND GOAL, THE PERINATAL SUBSTANCE USE DISORDER NAVIGATOR PROGRAM WAS STARTED. THIS PROGRAM IS EXCLUSIVELY FOR PREGNANT WOMEN WITH SUBSTANCE USE DISORDER. IT OFFERS WOMEN A HELPING HAND VIA A NURSE NAVIGATOR WHO COORDINATES CARE AND TRACKS PATIENTS TO ENSURE THEY HAVE ACCESS TO THE RESOURCES THEY NEED TO ACHIEVE THE BEST OUTCOMES.

3) DECREASE THE NUMBER OF SUICIDE DEATHS IN ALLEN COUNTY. TO ACHIEVE ITS THIRD GOAL, PARKVIEW HOSPITAL, INC. OFFERS THE SUICIDE OBVIATION SUPPORT (SOS) PROGRAM. THE SOS PROGRAM NAVIGATORS WALK ALONGSIDE, AT ELBOW'S LENGTH, PATIENTS EXPERIENCING SUICIDALITY, DOMESTIC VIOLENCE, OR BOTH. THE TEAM FOLLOWS UP WITHIN A WEEK OF DISCHARGE FROM THE HOSPITAL, CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC (CCBHC) OR THE EMERGENCY DEPARTMENT. ADDITIONALLY, NAVIGATORS ENSURE PATIENTS HAVE FOLLOW-UP APPOINTMENTS, NECESSARY MEDICATIONS, AND SAFETY PLANS AS WELL AS CONNECT THEM TO VALUABLE SERVICES SUCH AS CASE MANAGEMENT. USING THEIR COUNSELING ON ACCESS TO LETHAL MEANS (CALM) TRAINING, NAVIGATORS DISCUSS WITH PATIENTS ACCESS TO FIREARMS, MEDICATIONS AND OTHER LETHAL MEANS IN THEIR HOME AND DEVELOP A SUICIDE PREVENTION STRATEGY, DECREASING THE OPPORTUNITY FOR IMPULSIVE SUICIDE ATTEMPTS.

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

CARDIOVASCULAR DISEASE & DIABETES - TO ADDRESS CARDIOVASCULAR DISEASE AND DIABETES, PARKVIEW HOSPITAL, INC. AND ITS PARTNERS DEFINED THE FOLLOWING GOALS AND INTERRELATED PROGRAMS:

1) REDUCE ADULT AND CHILDHOOD OBESITY IN ALLEN COUNTY. THIS GOAL WILL BE ADDRESSED THROUGH:

A. TAKING ROOT HEALTH CHALLENGE: A PROGRAM CONTINUING FROM THE 2016 CHNA THAT PARTNERS WITH FORT WAYNE COMMUNITY SCHOOLS TO OFFER 4TH AND 5TH GRADERS THE OPPORTUNITY TO PARTICIPATE IN AEROBIC EXERCISE AND NUTRITIONAL EDUCATION.

B. HEALTH EATING ACTIVE LIVING (HEAL) INITIATIVE: THIS INITIATIVE FOCUSES ON INCREASING ACCESSIBILITY AND CONSUMPTION OF FRESH PRODUCE IN UNDERSERVED AND FOOD DESERT AREAS IN ALLEN COUNTY.

C. FITKIDS 360 (A STAGE TWO PEDIATRIC OBESITY TREATMENT PROGRAM): THIS PROGRAM FOCUSES ON IMPROVING OBESOGENIC RISK SCORES AND WELL-BEING BEHAVIORS OF PARTICIPANTS (CHILDREN AGES 5 TO 17 AND THEIR FAMILIES).

2) REDUCE THE EFFECTS OF FOOD INSECURITY AND IMPACT OF CHRONIC DISEASE IN UNDERSERVED POPULATIONS. TO MEET THIS GOAL, PARKVIEW INITIATED VEGGIE RX (A NUTRITION PRESCRIPTION PROGRAM) THAT WORKS TO INCREASE ACCESS TO AND CONSUMPTION OF FRESH PRODUCE AND REDUCE THE EFFECTS OF CHRONIC DISEASE THROUGH DIETARY INTERVENTIONS.

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

3) PREVENT OVERWEIGHT/OBESITY IN CHILDREN PARTICIPANTS DURING THE CRITICAL EARLY YEARS FROM 0 TO 3 YEARS OF AGE. TO MEET THIS GOAL PARKVIEW HOSPITAL, INC. WILL CONTINUE ITS WORK WITH THE SIMPLE SOLUTIONS FOR HEALTHY LIVING PROGRAM. THIS PROGRAM OFFERS FAMILY GOAL SETTING AND EDUCATION SESSIONS WITH THE PURPOSE OF INCREASING GOOD NUTRITION, PHYSICAL ACTIVITY, AND OTHER HEALTHY HABITS AMONG YOUNG FAMILY PARTICIPANTS.

4) DECREASE THE RISKS ASSOCIATED WITH OBESITY AND CHRONIC ILLNESS FOR UNINSURED PARTICIPANTS. THIS EFFORT WILL BE ADDRESSED VIA THE NUTRITION/EXERCISE PROGRAM THAT OFFERS COOKING DEMONSTRATIONS, EXERCISE SESSIONS AND NUTRITION EDUCATION.

5) PROMOTE HEALTH AND WELL-BEING AND REDUCE FOOD INSECURITY. TO ACCOMPLISH THIS GOAL, PARKVIEW HOSPITAL, INC. WILL WORK WITH THE PARKVIEW COMMUNITY GREENHOUSE AND LEARNING KITCHEN, STRATEGICALLY POSITIONED WITHIN A DESIGNATED FOOD DESERT IN THE COMMUNITY. AT THE GREENHOUSE AND LEARNING KITCHEN, PARTICIPANTS CAN GET FRESH PRODUCE AND LEARN HOW TO GROW VEGETABLES AND COOK NUTRITIOUS MEALS FOR THEIR FAMILIES. ADDITIONALLY, MANY OF THE INITIATIVES MENTIONED ABOVE (E.G. HEAL INITIATIVE, SIMPLE SOLUTIONS, VEGGIE RX, ETC.) HOLD EDUCATIONAL SESSIONS AT THIS FACILITY TO INCREASE ACCESS FOR ALLEN COUNTY'S VULNERABLE POPULATIONS.

MATERNAL/CHILD HEALTH - PARKVIEW HOSPITAL, INC. HAS DEVELOPED MULTIPLE EVIDENCE-BASED STRATEGIES TO ADDRESS INFANT MORTALITY WITH IMPROVED PRENATAL AND INPATIENT CARE AND THROUGH COLLABORATION WITH PARTNER ORGANIZATIONS TO MAKE OUR COMMUNITY A HEALTHIER PLACE FOR FAMILIES. THE FOLLOWING GOALS AND EFFORTS TO ADDRESS EACH GOAL WERE IDENTIFIED:

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

1) REDUCE THE NUMBER OF INFANT (<1 YEAR OF AGE) DEATHS IN ALLEN COUNTY DUE TO UNSAFE SLEEP. TO MEET THIS GOAL, THE CONTINUATION OF THE SAFE SLEEP CLASSES AND PACK 'N PLAY DISTRIBUTION PROGRAM IS REQUIRED. THIS PROGRAM PROVIDES PARTICIPANTS WITH FREE SAFE SLEEP EDUCATION, DISTRIBUTION OF A SAFE SLEEP KITS (INCLUDING A PACK 'N PLAY CRIB), CULTURAL SUPPORT AND HOME ENVIRONMENT SAFE SLEEP INSPECTIONS.

2) INCREASE THE NUMBER OF NEW MOMS IN PRIORITY POPULATIONS WHO ENGAGE IN EXCLUSIVE BREASTFEEDING. THIS GOAL IS BEING ADDRESSED THROUGH COMMUNITY BREASTFEEDING CLASSES AND A SUPPORT PROGRAM. THIS PROGRAM PROVIDES PARTICIPANTS WITH INSTRUCTION ON BREASTFEEDING HEALTH BENEFITS, MECHANICS, AND RESOURCES FOR ONGOING SUPPORT.

3) REDUCE VEHICULAR DEATH AND INJURY OF INFANTS IN ALLEN COUNTY. TO ADDRESS THIS GOAL, THE COMMUNITY HEALTH WORKER (SAFETY PIN) PROGRAM WILL CONTINUE TO PROVIDE ONE-ON-ONE CAR SEAT INSTALLATION EDUCATION ALONG WITH CULTURAL SUPPORT AND INTERPRETATION SERVICES IF NEEDED.

4) DECREASE INFANT (<1 YEAR OF AGE) MORTALITY RATE IN ALLEN COUNTY. TO MEET THIS GOAL, PARKVIEW HOSPITAL, INC. HAS BEEN WORKING WITH THE FETAL INFANT MORTALITY REVIEW (FIMR) INITIATIVE. FIMR IS A MULTIDISCIPLINARY GROUP ORGANIZED TO REVIEW CASES OF FETAL AND INFANT DEATHS FOR PREVENTION PURPOSES. THE PROGRAM SEEKS TO PROVIDE PARTICIPANTS WITH IMPROVED REFERRALS TO COMMUNITY RESOURCES AND A BETTER UNDERSTANDING OF BARRIERS AND SOCIAL NEEDS.



**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

5) DECREASE THE RATE OF PRE-TERM BIRTHS. IN EFFORT TO MEET THIS GOAL, THE COMMUNITY HEALTH WORKER (SAFETY PIN) PROGRAM HAS BEEN MONITORING PRENATAL APPOINTMENT ATTENDANCE. THIS PROGRAM SEEKS TO DECREASE THE NUMBER OF PRENATAL VISIT "NO SHOWS" FOR PROGRAM PARTICIPANTS BY REDUCING BARRIERS TO ACCESSING CARE. SAFETY PIN COMMUNITY HEALTH WORKERS WORK WITH CLIENTS TO ASSESS FOR TRANSPORTATION RELIABILITY, IDENTIFY UNMET SOCIAL NEEDS, CO-CREATE INSURANCE AND TRANSPORTATION GOALS, AND SUBSEQUENTLY CONNECT PARTICIPANTS WITH CRITICAL COMMUNITY RESOURCES.

6) IMPROVE THE HEALTH OF PREGNANT WOMEN AND INFANTS IN ALLEN COUNTY. THIS GOAL IS BEING ADDRESSED THROUGH EFFORTS TO REDUCE FOOD INSECURITY VIA THE COMMUNITY HEALTH WORKER (SAFETY PIN) PROGRAM. INTERVENTIONS INCLUDE FOOD INSECURITY SCREENING, REFERRALS TO RESOURCES, COACHING RELATED TO MEAL PREPARATION AND FOLLOW-THROUGH IN OBTAINING RESOURCES.

(NARRATIVE CONTINUED AFTER PART V, LINE 16C)

PARKVIEW HOSPITAL, INC.

PART V, LINE 16A, FAP WEBSITE:

[HTTPS://WWW.PARKVIEW.COM/PATIENTS-VISITORS/FINANCIAL-ASSISTANCE](https://www.parkview.com/patients-visitors/financial-assistance)

PARKVIEW HOSPITAL, INC.

PART V, LINE 16B, FAP APPLICATION WEBSITE:

[HTTPS://WWW.PARKVIEW.COM/PATIENTS-VISITORS/FINANCIAL-ASSISTANCE](https://www.parkview.com/patients-visitors/financial-assistance)

PARKVIEW HOSPITAL, INC.

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

PART V, LINE 16C, FAP PLAIN LANGUAGE SUMMARY WEBSITE:

[HTTPS://WWW.PARKVIEW.COM/PATIENTS-VISITORS/FINANCIAL-ASSISTANCE](https://www.parkview.com/patients-visitors/financial-assistance)

PART V, SECTION B, LINE 11, CONT'D

DESCRIBE HOW THE HOSPITAL FACILITY IS ADDRESSING THE SIGNIFICANT NEEDS IDENTIFIED IN ITS MOST RECENTLY CONDUCTED CHNA AND ANY SUCH NEEDS THAT ARE NOT BEING ADDRESSED TOGETHER WITH THE REASONS WHY SUCH NEEDS ARE NOT BEING ADDRESSED:

SIGNIFICANT HEALTH NEEDS NOT BEING ADDRESSED:

BASED UPON FEASIBILITY AND AVAILABLE PUBLIC HEALTH INTERVENTIONS, THE HEALTH NEEDS DEFINED BELOW ARE NOT BEING ADDRESSED BY PARKVIEW HOSPITAL, INC. FEASIBILITY INCLUDES THE SUITABILITY, COMMUNITY ACCEPTABILITY, AVAILABILITY OF RESOURCES, PRE-EXISTING COMMUNITY AGENCIES, COST-BENEFIT RATIO, AND LEGALITY OF POTENTIAL INTERVENTIONS. EVEN THOUGH PARKVIEW HOSPITAL, INC. IS NOT ADDRESSING THE FOLLOWING NEEDS SPECIFICALLY, THE HOSPITAL MAINTAINS CORRESPONDENCE WITH EXTERNAL AGENCIES ADDRESSING THESE NEEDS.

AGING - AGING AND IN-HOME SERVICES OF NORTHEAST INDIANA (AIHS) SERVES OLDER ADULTS, PERSONS WITH DISABILITIES AND THEIR CAREGIVERS IN NINE COUNTIES IN NORTHEAST INDIANA. THIS NOT-FOR-PROFIT, COMMUNITY-BASED ORGANIZATION IS A FEDERAL- AND STATE-DESIGNATED AREA AGENCY ON AGING AND AN AGING AND DISABILITY RESOURCE CENTER THAT PROVIDES STREAMLINED ACCESS TO INFORMATION, CARE OPTIONS, SHORT-TERM CASE MANAGEMENT AND

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

BENEFITS ENROLLMENT ACROSS A SPECTRUM OF LONG-TERM CARE SERVICES.

THROUGH THE CARE TRANSITIONS PROGRAM, AIHS PARTNERS WITH PARKVIEW HEALTH TO REDUCE MEDICARE READMISSIONS. IN ADDITION, THE AGENCY SERVES AS THE INITIAL COORDINATOR AND FISCAL AGENT FOR HONORING CHOICES INDIANA, WHICH IS AN INITIATIVE COMMITTED TO PROMOTING AND SUSTAINING ADVANCE CARE PLANNING (ACP) ACROSS THE STATE. HONORING CHOICES INDIANA ENSURES THAT INDIVIDUALS' FUTURE HEALTHCARE PREFERENCES ARE DISCUSSED, DOCUMENTED, AND HONORED. THROUGH HONORING CHOICES, PARKVIEW AND AIHS WORK TOGETHER TO TRAIN ACP FACILITATORS, PROMOTE BEST PRACTICE, AND INCREASE PUBLIC AWARENESS ABOUT THE VALUE OF DISCUSSING HEALTHCARE DECISION-MAKING IN ADVANCE OF MEDICAL CRISIS.

OBESITY - WHILE WE ARE NOT ADDRESSING OBESITY SPECIFICALLY, COMBATTING THE LONG-TERM IMPACT OF OBESITY, THROUGH BOTH PREVENTION AND TREATMENT, IS FOUNDATIONAL TO OUR CURRENT EFFORTS RELATED TO CARDIOVASCULAR HEALTH AND DIABETES. WE PLAN TO CONTINUE AND BUILD ON OUR CURRENT COMMUNITY EFFORTS AIMED AT REDUCING/PREVENTING OBESITY AND IMPROVING HEALTHY LIVING PRACTICES AS A MEANS OF PREVENTING AND/OR TREATING CHRONIC DISEASE IN OUR COMMUNITY.

TOBACCO USE - TOBACCO FREE ALLEN COUNTY (TFAC) IS THE LEAD ORGANIZATION IN ALLEN COUNTY, INDIANA, RELATED TO TOBACCO-FREE EFFORTS. TFAC PROVIDES INFORMATION ABOUT LOCAL SMOKING CESSATION PROGRAMS AND ADVOCATES FOR NO-SMOKING PUBLIC POLICY AT THE STATE LEVEL. THEIR GOALS INCLUDE DECREASING YOUTH AND ADULT TOBACCO USE, INCREASING PROTECTIONS AGAINST SECOND-HAND SMOKE AND BUILDING/MAINTAINING THE LOCAL TOBACCO CONTROL INFRASTRUCTURE. PARKVIEW HOSPITAL, INC. IS ALSO A SOURCE OF

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

SMOKING CESSATION PROGRAMS AND OPERATES A TOBACCO-FREE CAMPUS. IN

ADDITION, PARKVIEW HOSPITAL, INC. HOLDS A PROGRAM, NICOTINE FREE FOR

BABY AND ME CLASSES TO HELP PREGNANT WOMEN TO QUIT SMOKING.

PART V, SECTION B, LINE 3E:

THE SIGNIFICANT HEALTH NEEDS ARE A PRIORITIZED DESCRIPTION OF THE

SIGNIFICANT HEALTH NEEDS OF THE COMMUNITY AND IDENTIFIED THROUGH THE

CHNA.

**Part V Facility Information** (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**

(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? 17

Name and address	Type of Facility (describe)
1 PARKVIEW MED PARK 11 OP PHARMACY 11104 PARKVIEW CIRCLE DR FORT WAYNE, IN 46845	OP PHARMACY
2 PARKVIEW CANCER INSTITUTE LAB 11104 PARKVIEW CIRCLE DR FORT WAYNE, IN 46845	LAB DRAW
3 CAREW MEDICAL PARK LAB 1818 CAREW ST FORT WAYNE, IN 46805	LAB DRAW
4 BRYAN OH LAB 442 W HIGH ST BRYAN, OH 43506	LAB DRAW
5 LIMA ROAD FAMILY MEDICINE LAB 11055 TWIN CREEKS COVE FORT WAYNE, IN 46804	LAB DRAW
6 ST JOE ROAD LAB SERVICES 5693 YMCA PARK DR FORT WAYNE, IN 46835	LAB DRAW
7 NORTH CLINTON LAB 5104 NORTH CLINTON FORT WAYNE, IN 46825	LAB DRAW
8 OP THERAPY PRMC MOB11 11104 PARKVIEW CIRCLE DR SUITE 050 FORT WAYNE, IN 46845	OP THERAPY
9 ARCHBOLD OH LAB 121 WESTFIELD DR ARCHBOLD, OH 43502	LAB DRAW
10 PRMC MOB2 OB-GYN LAB 111123 PARKVIEW PLAZA SUITE 101 FORT WAYNE, IN 46845	LAB DRAW

**Part V Facility Information** (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**

(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? 17

Name and address	Type of Facility (describe)
11 MONTPELIER OH LAB 935 SNYDER MONTPELIER, OH 43543	LAB DRAW
12 WAUSEON OH LAB 495 S SHOOP AVE WAUSEON, OH 43567	LAB DRAW
13 PARKVIEW RESEARCH CENTER 10622 PARKVIEW PLAZA DR FORT WAYNE, IN 46845	CLINICAL RESEARCH
14 WAYNE DALE TEMPLE LAB 8607 TEMPLE DR FORT WAYNE, IN 46809	LAB DRAW
15 CAREW CENTER OB-GYN LAB 2414 EAST STATE FORT WAYNE, IN 46805	LAB DRAW
16 GRABILL MAIN LAB 13430 MAIN ST GRABILL, IN 46741	LAB DRAW
17 PARKVIEW CENTER FOR HEALTHY LIVING 1234 E DUPONT RD SUITE 2 FORT WAYNE, IN 46845	HEALTH AND WELLNESS

**Part VI Supplemental Information**

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

PART I, LINE 3C:

EQUITY IN A HOME OTHER THAN THE PATIENT OR GUARANTOR'S PRIMARY RESIDENCE.

PART I, LINE 6A:

THE RELATED ENTITIES OF PARKVIEW HEALTH SYSTEM, INC. (EIN 35-1972384); PARKVIEW HOSPITAL, INC. (EIN 35-0868085); COMMUNITY HOSPITAL OF LAGRANGE COUNTY, INC. (EIN 20-2401676); COMMUNITY HOSPITAL OF NOBLE COUNTY, INC. (EIN 35-2087092); HUNTINGTON MEMORIAL HOSPITAL, INC. (EIN 35-1970706); WHITLEY MEMORIAL HOSPITAL, INC. (EIN 35-1967665); DEKALB MEMORIAL HOSPITAL, INC. (EIN 35-1064295; PARK CENTER, INC. (EIN 35-1135451); AND PARKVIEW WABASH HOSPITAL, INC. (EIN 47-1753440) PREPARED A COMBINED REPORT TO THE COMMUNITY DETAILING COMMUNITY BENEFIT PROGRAMS AND SERVICES.

PART I, LINE 7:

PART I, LINE 7A

THE FINANCIAL ASSISTANCE COST REPORTED ON LINE 7A IS CALCULATED UNDER THE COST TO CHARGE RATIO METHODOLOGY. UNDER THIS METHOD, THE FINANCIAL ASSISTANCE CHARGES FOREGONE ARE MULTIPLIED BY THE RATIO OF COST TO CHARGES

**Part VI** Supplemental Information (Continuation)

TO DETERMINE THE COST OF SERVICES RENDERED.

## PART I, LINE 7B

PARKVIEW HOSPITAL, INC. ACCEPTS ALL MEDICAID, MEDICAID MANAGED CARE, AND OUT-OF-STATE MEDICAID PATIENTS WITH THE KNOWLEDGE THAT THERE MAY BE SHORTFALLS. INTERNAL REVENUE SERVICE (IRS) REVENUE RULING 69-545 IMPLIES THAT TREATING MEDICAID PATIENTS IS A COMMUNITY BENEFIT. IRS REVENUE RULING 69-545, WHICH ESTABLISHED THE COMMUNITY BENEFIT STANDARD FOR NONPROFIT HOSPITALS, STATES THAT IF A HOSPITAL SERVES PATIENTS WITH GOVERNMENTAL HEALTH BENEFITS, INCLUDING MEDICAID, THEN THIS IS AN INDICATION THAT THE HOSPITAL OPERATES TO PROMOTE THE HEALTH OF THE COMMUNITY. THE UNREIMBURSED MEDICAID COST REPORTED ON LINE 7B IS CALCULATED UNDER THE COST TO CHARGE RATIO METHODOLOGY. UNDER THIS METHOD, THE MEDICAID CHARGES ARE MULTIPLIED BY THE RATIO OF COST TO CHARGES TO DETERMINE THE COST OF MEDICAID SERVICES RENDERED. THEN, THE COST OF MEDICAID SERVICES RENDERED IS DEDUCTED FROM THE REIMBURSEMENT RECEIVED FOR MEDICAID PATIENTS TO ARRIVE AT A GAIN/(LOSS) RELATIVE TO THESE PATIENTS.

## PART I, LINE 7C

PARKVIEW HOSPITAL, INC. ACCEPTS ALL CERTAIN MEANS-TESTED PATIENTS FROM THE HEALTHY INDIANA PLAN (HIP) WITH THE KNOWLEDGE THAT THERE MAY BE SHORTFALLS. INTERNAL REVENUE SERVICE (IRS) REVENUE RULING 69-545 IMPLIES THAT TREATING MEANS-TESTED PATIENTS IS A COMMUNITY BENEFIT. IRS REVENUE RULING 69-545, WHICH ESTABLISHED THE COMMUNITY BENEFIT STANDARD FOR NONPROFIT HOSPITALS, STATES THAT IF A HOSPITAL SERVES PATIENTS WITH GOVERNMENTAL HEALTH BENEFITS, INCLUDING HIP, THEN THIS IS AN INDICATION THAT THE HOSPITAL OPERATES TO PROMOTE THE HEALTH OF THE COMMUNITY. THE UNREIMBURSED HIP COST REPORTED ON LINE 7C IS CALCULATED UNDER THE COST TO



**Part VI** Supplemental Information (Continuation)

CHARGE RATIO METHODOLOGY. UNDER THIS METHOD, THE HIP CHARGES ARE MULTIPLIED BY THE RATIO OF COST TO CHARGES TO DETERMINE THE COST OF HIP SERVICES RENDERED. THEN, THE COST OF HIP SERVICES RENDERED IS DEDUCTED FROM THE REIMBURSEMENT RECEIVED FOR HIP PATIENTS TO ARRIVE AT A GAIN/(LOSS) RELATIVE TO THESE PATIENTS.

## PART I, LINE 7E

AMOUNTS PRESENTED ARE BASED ON ACTUAL SPEND FOR THOSE SERVICES AND BENEFITS PROVIDED DEEMED TO IMPROVE THE HEALTH OF THE COMMUNITIES IN WHICH WE SERVE AND CONFORM WITH THE MISSION OF OUR EXEMPT PURPOSE.

## PART I, LINE 7F

AMOUNTS PRESENTED ARE BASED UPON ACTUAL SPEND AND ARE IN CONFORMITY WITH AGREED UPON COMMITMENTS WITH THE VARIOUS EDUCATIONAL PROGRAMS.

## PART I, LINE 7G

AMOUNTS PRESENTED DO NOT INCLUDE ANY COSTS ASSOCIATED WITH PHYSICIAN CLINICS.

## PART I, LINE 7H

AMOUNTS PRESENTED REPRESENT ACTUAL SPEND TO SUPPORT THE RESEARCH CONDUCTED BY THE PARKVIEW RESEARCH CENTER. SPEND IS BASED ON THE OPERATING EXPENSES ASSOCIATED WITH RESEARCH ACTIVITIES OVER AND ABOVE GRANTS AND OTHER REVENUE RECEIVED BY THE CENTER.

## PART I, LINE 7I

IN KEEPING WITH OUR MISSION AND COMMITMENT TO THE COMMUNITIES IN WHICH WE SERVE, PARKVIEW HOSPITAL, INC. CONTINUES ITS TRADITION OF CONTRIBUTING TO

**Part VI** Supplemental Information (Continuation)

NUMEROUS ORGANIZATIONS ON BOTH AN AS-NEEDED BASIS AND NEGOTIATED BASIS.  
AMOUNTS PRESENTED REPRESENT ACTUAL SPEND TO ORGANIZATIONS THROUGHOUT OUR  
COMMUNITIES.

PART I, LN 7 COL(F):

PERCENT OF TOTAL EXPENSE

PARKVIEW HOSPITAL, INC. EXCLUDED \$227,765,864 OF PH CLINICAL SUPPORT  
EXPENSE.

PART II, COMMUNITY BUILDING ACTIVITIES:

DESCRIBE HOW THE ORGANIZATION'S COMMUNITY BUILDING ACTIVITIES, AS  
REPORTED, PROMOTES THE HEALTH OF THE COMMUNITIES THE ORGANIZATION SERVES.

ECONOMIC DEVELOPMENT:

PARKVIEW HOSPITAL, INC. HAS A STRONG COMMITMENT TO SUPPORTING AND  
ENHANCING THE VITALITY OF OUR COMMUNITY AND THE NORTHEAST INDIANA REGION.  
THE HOSPITAL INVESTS IN PROJECTS THAT HELP TO IMPROVE THE HEALTH AND  
INSPIRE THE WELL-BEING OF THE COMMUNITY. SOME OF THIS WORK IS ACCOMPLISHED  
THROUGH PARTICIPATION AND FINANCIAL SUPPORT OF ORGANIZATIONS THAT ARE  
PRIMARILY FOCUSED ON ECONOMIC DEVELOPMENT ACTIVITIES, E.G., THE REGIONAL  
CHAMBER OF NORTHEAST INDIANA. THE MISSION OF THIS ORGANIZATION IS "TO  
PROMOTE AN ENVIRONMENT IN WHICH INDIVIDUALS, BUSINESSES AND COMMUNITIES  
CAN THRIVE IN A GLOBAL ECONOMY." SERVING AS AN ADVOCATE FOR BUSINESS IN  
AN ELEVEN-COUNTY AREA, THEIR FOCUS IS ON WORKFORCE TALENT, A COMPETITIVE  
BUSINESS CLIMATE, RURAL INVESTMENT AND WORLD CLASS INFRASTRUCTURE.

PART III, LINE 2:

FOR FINANCIAL STATEMENT PURPOSES, THE ORGANIZATION HAS ADOPTED ACCOUNTING

**Part VI** Supplemental Information (Continuation)

STANDARDS UPDATE NO. 2014-09 (TOPIC 606). IMPLICIT PRICE CONCESSIONS INCLUDES BAD DEBTS. THEREFORE, BAD DEBTS ARE INCLUDED IN NET PATIENT REVENUE IN ACCORDANCE WITH HEALTHCARE FINANCIAL MANAGEMENT ASSOCIATION STATEMENT NO. 15 AND BAD DEBT EXPENSE IS NOT SEPARATELY REPORTED AS AN EXPENSE.

PART III, LINE 4:

BAD DEBT EXPENSE - PARKVIEW HEALTH SYSTEM, INC. AND SUBSIDIARIES - NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

TEXT OF THE FOOTNOTE TO THE ORGANIZATION'S FINANCIAL STATEMENTS THAT DESCRIBES BAD DEBT EXPENSE OR THE PAGE NUMBER ON WHICH THIS FOOTNOTE IS CONTAINED IN THE ATTACHED FINANCIAL STATEMENTS:

PAGES 12 AND 23 - 26 OF ATTACHED FINANCIAL STATEMENTS.

PART III, LINE 8:

COMMUNITY BENEFIT & METHODOLOGY FOR DETERMINING MEDICARE COSTS

SUBSTANTIAL SHORTFALLS TYPICALLY ARISE FROM PAYMENTS THAT ARE LESS THAN THE COST TO PROVIDE THE CARE OR SERVICES AND DO NOT INCLUDE ANY AMOUNTS RELATING TO INEFFICIENT OR POOR MANAGEMENT. PARKVIEW HOSPITAL, INC. ACCEPTS ALL MEDICARE PATIENTS, AS REFLECTED ON THE YEAR-END MEDICARE COST REPORT, WITH THE KNOWLEDGE THAT THERE MAY BE SHORTFALLS. INTERNAL REVENUE SERVICE (IRS) REVENUE RULING 69-545 IMPLIES THAT TREATING MEDICARE PATIENTS IS A COMMUNITY BENEFIT. IRS REVENUE RULING 69-545, WHICH ESTABLISHED THE COMMUNITY BENEFIT STANDARD FOR NONPROFIT HOSPITALS, STATES THAT IF A HOSPITAL SERVES PATIENTS WITH GOVERNMENTAL HEALTH BENEFITS, INCLUDING MEDICARE, THEN THIS IS AN INDICATION THAT THE HOSPITAL OPERATES

**Part VI** Supplemental Information (Continuation)

TO PROMOTE THE HEALTH OF THE COMMUNITY. HOWEVER, MEDICARE PAYMENTS REPRESENT A PROXY OF COST CALLED THE "UPPER PAYMENT LIMIT." IT HAS HISTORICALLY BEEN ASSUMED THAT UPPER PAYMENT LIMIT PAYMENTS DO NOT GENERATE A SHORTFALL. AS A RESULT, PARKVIEW HOSPITAL, INC. HAS TAKEN THE POSITION NOT TO INCLUDE THE MEDICARE SHORTFALLS OR SURPLUSES AS PART OF COMMUNITY BENEFIT. PARKVIEW HOSPITAL, INC. RECOGNIZES THAT THE SHORTFALL OR SURPLUS FROM MEDICARE DOES NOT INCLUDE THE COSTS AND REVENUES ASSOCIATED WITH MEDICARE ADVANTAGE PATIENTS. AS SUCH, THE TOTAL SHORTFALL OR SURPLUS OF MEDICARE IS UNDERSTATED DUE TO THE COSTS AND REVENUES ASSOCIATED WITH MEDICARE ADVANTAGE PATIENTS NOT BEING INCLUDED IN THE COMMUNITY BENEFIT DETERMINATION.

## PART III, LINE 9B:

A PATIENT'S FAILURE TO MAKE PAYMENT ARRANGEMENTS THROUGH VARIOUS AVAILABLE PAYMENT OPTIONS OR FAILURE TO APPLY FOR AND RECEIVE APPROVAL UNDER THE FINANCIAL ASSISTANCE POLICY MAY RESULT IN THE ACCOUNT BEING REFERRED TO A COLLECTION AGENCY DUE TO NON-PAYMENT. THE COLLECTION AGENCY MAY REPORT THE ACCOUNT TO ONE OR ALL THREE CREDIT REPORTING AGENCIES, WHICH MAY ADVERSELY AFFECT THE PATIENT'S CREDIT SCORE.

A PATIENT MAY APPLY FOR FINANCIAL ASSISTANCE AT ANY TIME DURING THE APPLICATION PERIOD, EVEN IF THE ACCOUNT HAS BEEN PLACED WITH A COLLECTION AGENCY. IF AN INDIVIDUAL SUBMITS A COMPLETE FINANCIAL ASSISTANCE APPLICATION DURING THE APPLICATION PERIOD, AND PARKVIEW HEALTH DETERMINES THE INDIVIDUAL IS ELIGIBLE FOR FINANCIAL ASSISTANCE, THEN PARKVIEW HEALTH WILL TAKE ALL REASONABLE AVAILABLE MEASURES TO REVERSE ANY EXTRAORDINARY COLLECTION ACTION (EXCEPT FOR A SALE OF DEBT) TAKEN AGAINST THE INDIVIDUAL TO OBTAIN PAYMENT FOR THE CARE. ALSO, IF AN INDIVIDUAL SUBMITS AN

**Part VI** Supplemental Information (Continuation)

INCOMPLETE FINANCIAL ASSISTANCE APPLICATION DURING THE APPLICATION PERIOD, PARKVIEW WILL SUSPEND ANY EXTRAORDINARY COLLECTION ACTIONS AGAINST THE INDIVIDUAL (WITH RESPECT TO CHARGES TO WHICH THE FINANCIAL ASSISTANCE APPLICATION UNDER REVIEW RELATES) UNTIL THE FINANCIAL ASSISTANCE APPLICATION HAS BEEN PROCESSED AND AN ELIGIBILITY DECISION RENDERED.

PART VI, LINE 2:

DESCRIBE HOW THE ORGANIZATION ASSESSES THE HEALTH CARE NEEDS OF THE COMMUNITIES IT SERVES, IN ADDITION TO ANY CHNAS REPORTED IN PART V, SECTION B.

IN ADDITION TO COMPLETING A COMMUNITY HEALTH NEEDS ASSESSMENT ON A TRIENNIAL BASIS, PARKVIEW HOSPITAL, INC. ASSESSES THE HEALTHCARE NEEDS OF THE COMMUNITY IT SERVES THROUGH PRIMARY AND SECONDARY DATA ANALYSIS, WORKING WITH THE ORGANIZATION'S COMMUNITY PARTNERS, AND FRONTLINE STAFF. PARKVIEW HOSPITAL, INC. IDENTIFIES AND VERIFIES COMMUNITY HEALTH NEEDS THROUGH THE FOLLOWING:

1. HEALTHY COMMUNITIES INSTITUTE (HCI) SECONDARY DATA ANALYSIS

2. OBSERVATIONS AND DATA COLLECTED FROM FRONTLINE STAFF WORKING WITH VULNERABLE POPULATIONS (I.E., COMMUNITY NURSES AND COMMUNITY HEALTH WORKERS)

3. REVIEW OF COMMUNITY NEEDS ASSESSMENTS CONDUCTED BY LOCAL ORGANIZATIONS (I.E., UNITED WAY, BRIGHTPOINT, ETC.)

4. PARKVIEW LEADERS SERVING ON HEALTH-RELATED AND SOCIAL SERVICE BOARDS OF

**Part VI** Supplemental Information (Continuation)

DIRECTORS IN THE COMMUNITY

5. OTHER PUBLIC HEALTH DATABASES (E.G. COMMUNITY COMMONS, COUNTY HEALTH RANKINGS)

KEY HOSPITAL REPRESENTATIVES MAINTAIN ON-GOING RELATIONSHIPS THROUGHOUT THE COMMUNITY AND MEET REGULARLY WITH ORGANIZATIONS THAT SHARE THE MISSION OF IMPROVING THE HEALTH AND INSPIRING THE WELL-BEING OF THE COMMUNITY WE SERVE.

PART VI, LINE 3:

DESCRIBE HOW THE ORGANIZATION INFORMS AND EDUCATES PATIENTS AND PERSONS WHO MAY BE BILLED FOR PATIENT CARE ABOUT THEIR ELIGIBILITY FOR ASSISTANCE UNDER FEDERAL, STATE OR LOCAL GOVERNMENT PROGRAMS OR UNDER THE ORGANIZATION'S FINANCIAL ASSISTANCE POLICY.

SIGNAGE AND BROCHURES ARE POSTED AND AVAILABLE AT ALL HOSPITAL POINTS OF REGISTRATION AND IN THE EMERGENCY DEPARTMENT. PATIENTS ARE OFFERED PLAIN LANGUAGE SUMMARIES OF THE FINANCIAL ASSISTANCE POLICY DURING THE REGISTRATION PROCESS AND IN EACH FOLLOW UP STATEMENT SENT TO THE PATIENT. PATIENT STATEMENTS WILL INDICATE HOW A PATIENT CAN OBTAIN FINANCIAL ASSISTANCE APPLICATIONS AND WHO THEY CAN CONTACT FOR ASSISTANCE.

PART VI, LINE 4:

DESCRIBE THE COMMUNITY THE ORGANIZATION SERVES, TAKING INTO ACCOUNT THE GEOGRAPHIC AREA AND DEMOGRAPHIC CONSTITUENTS IT SERVES.

THE FACILITIES OF PARKVIEW HOSPITAL, INC., CONSISTING OF THE PARKVIEW

**Part VI** Supplemental Information (Continuation)

REGIONAL MEDICAL CENTER, PARKVIEW HOSPITAL RANDALLIA AND THE PARKVIEW BEHAVIORAL HEALTH INSTITUTE, ARE LOCATED IN ALLEN COUNTY. ACCORDING TO STATS INDIANA, ALLEN COUNTY, OR MORE SPECIFICALLY FORT WAYNE, INDIANA, IS THE LARGEST URBAN AREA WITHIN THE HEALTH SYSTEM'S SERVICE AREA WITH A POPULATION OF 382,187. IN ADDITION, CONDUENT HEALTHY COMMUNITIES INSTITUTE REPORTS THE MEDIAN INCOME OF ALLEN COUNTY RESIDENTS IS APPROXIMATELY \$54,857, WITH 13.3% LIVING BELOW THE FEDERAL POVERTY LEVEL (2015-2019). APPROXIMATELY 89.4% OF ALLEN COUNTY RESIDENTS HAVE HEALTH INSURANCE (2019).

ACCORDING TO THE INDIANA HOSPITAL ASSOCIATION DIMENSIONS DATABASE, PARKVIEW HOSPITAL, INC. FACILITIES (PARKVIEW HOSPITAL RANDALLIA, PARKVIEW REGIONAL MEDICAL CENTER AND PARKVIEW BEHAVIORAL HEALTH) IN ALLEN COUNTY HAD 29.3% OF INPATIENT DISCHARGES THAT WERE MEDICAID PATIENTS AND 3% WERE SELF-PAY. FOR OUTPATIENT PROCEDURES, 21.1% WERE MEDICAID PATIENTS, AND 2.9% PERCENT WERE SELF-PAY (2021).

ALLEN COUNTY IS ALSO SERVED BY LUTHERAN HEALTH NETWORK, A FOR-PROFIT HEALTH SYSTEM OPERATING THREE HOSPITAL FACILITIES IN ALLEN COUNTY. HEALTH RESOURCES & SERVICES ADMINISTRATION (HRSA) HAS DESIGNATED/IDENTIFIED THE FOLLOWING MEDICALLY UNDERSERVED AREAS/POPULATIONS:

ALLEN COUNTY:

1) DISCIPLINE: MENTAL HEALTH

HPSA ID: 7183515359

HPSA NAME: MHCA 20

DESIGNATION TYPE: HIGH NEEDS GEOGRAPHIC HPSA

**Part VI** Supplemental Information (Continuation)

HPSA SCORE: 16

STATUS: DESIGNATED

RURAL STATUS: PARTIALLY RURAL

2) DISCIPLINE: PRIMARY CARE

HPSA ID: 7189991824

HPSA NAME: NEIGHBORHOOD HEALTH CLINIC INC.

DESIGNATION TYPE: FEDERALLY QUALIFIED HEALTH CENTER

HPSA SCORE: 20

STATUS: DESIGNATED

RURAL STATUS: NON-RURAL

3) DISCIPLINE: PRIMARY CARE

HPSA ID: CITY OF FORT WAYNE

HPSA NAME: CITY OF FORT WAYNE

DESIGNATION TYPE: HIGH NEEDS GEOGRAPHIC HPSA

HPSA SCORE: 5

STATUS: DESIGNATED

RURAL STATUS: NON-RURAL

PARKVIEW AND THE NEIGHBORHOOD HEALTH CLINIC OPERATE A SATELLITE LOCATION IN SOUTHEAST FORT WAYNE (PARKVIEW NEIGHBORHOOD HEALTH CLINIC). IN ADDITION TO THE CLINIC, THE FACILITY HOUSES THE PARKVIEW CENTER FOR HEALTHY LIVING, WHICH PROVIDES HEALTH PREVENTION EDUCATION AND OTHER SERVICES TO PROMOTE HEALTHY LIVING PRACTICES TO THE LOCAL UNDERSERVED POPULATION. ALSO, LOCATED IN FORT WAYNE, A FREE MEDICAL, DENTAL AND VISION CLINIC, MATTHEW 25, SERVES UNINSURED, LOW-INCOME INDIVIDUALS IN NORTHEAST INDIANA AND NORTHWEST OHIO. PARKVIEW HOSPITAL, INC. LOCATED WITHIN LAFAYETTE MEDICAL



**Part VI** Supplemental Information (Continuation)

CENTER IN FORT WAYNE, INDIANA, ALLIANCE HEALTH CENTERS PROVIDES PRIMARY MEDICAL AND BEHAVIORAL HEALTH CARE FOR PATIENTS OF ALL AGES, REGARDLESS OF ABILITY TO PAY.

PARK CENTER, INC., AN AFFILIATE OF PARKVIEW HEALTH SYSTEM, INC., OFFERS AN ARRAY OF COMPREHENSIVE AND INDIVIDUALIZED INPATIENT AND OUTPATIENT TREATMENT SERVICES TO MEET THE MENTAL HEALTH NEEDS OF THE SERVICE AREA. PARK CENTER'S LOCATIONS ARE STRATEGICALLY PLACED THROUGHOUT THE DOWNTOWN AREA OF FORT WAYNE, INDIANA.

PART VI, LINE 5:

PROVIDE ANY OTHER INFORMATION IMPORTANT TO DESCRIBING HOW THE ORGANIZATION'S HOSPITAL FACILITIES OR OTHER HEALTH CARE FACILITIES FURTHER ITS EXEMPT PURPOSE BY PROMOTING THE HEALTH OF THE COMMUNITY (E.G. OPEN MEDICAL STAFF, COMMUNITY BOARD, USE OF SURPLUS FUNDS, ETC.).

PARKVIEW HOSPITAL, INC. SEEKS TO DELIVER EXCELLENT CARE TO EVERY PATIENT, EVERY DAY. IN DOING SO, THE HOSPITAL HAS DEVELOPED ITS INFRASTRUCTURE, POLICIES AND PROCEDURES TO ALIGN WITH THIS GOAL. THIS INCLUDES HAVING A BOARD OF DIRECTORS FOR PARKVIEW HOSPITAL, INC. THAT IS COMPRISED OF INDEPENDENT COMMUNITY MEMBERS RESIDING WITHIN THE HOSPITAL'S PRIMARY SERVICE AREA AND EXTENDING MEDICAL STAFF PRIVILEGES TO ALL QUALIFIED PHYSICIANS IN THE COMMUNITY. WHILE THESE TWO COMPONENTS ARE CENTRAL IN PROVIDING THE HOSPITAL WITH A STRONG FOUNDATION, IT TAKES A LOT MORE THAN THIS TO MEET THE HOSPITAL'S STANDARD OF DELIVERING EXCELLENT CARE TO EVERY PATIENT, EVERY DAY. TO PARKVIEW HOSPITAL, INC., ACHIEVING THIS STANDARD OF CARE REQUIRES FURTHERING RESEARCH, PROMOTING EDUCATION, ADVANCING CLINICAL CARE AND BUILDING A STRONG COMMUNITY.

**Part VI** Supplemental Information (Continuation)

FOUNDED IN 1993, THE PARKVIEW RESEARCH CENTER HAS BROUGHT MORE THAN 150 CLINICAL TRIALS TO PATIENTS AND PROVIDERS FOR NOVEL AND POTENTIALLY LIFE-SAVING TREATMENT. OUR MAJOR FOCUS HAS BEEN PHASE II AND PHASE III SPONSORED CLINICAL TRIALS. THE PARKVIEW RESEARCH CENTER IS UNIQUELY SITUATED TO PARTICIPATE IN COLLABORATIVE RESEARCH EFFORTS WITH LOCAL AND NATIONAL ACADEMIC PARTNERS. ONE OF OUR OLDEST COLLABORATIONS IS WITH THE INDIANA UNIVERSITY SCHOOL OF MEDICINE. THE STUDENT EDUCATION AND RESEARCH FELLOWSHIP (SERF) PROGRAM (FORMERLY THE MIDWEST ALLIANCE FOR HEALTH EDUCATION) WAS ESTABLISHED MORE THAN 30 YEARS AGO AND CONTINUES TO SERVE THE SURROUNDING REGION. WITHIN THIS FELLOWSHIP PROGRAM, STUDENTS ARE IN-RESIDENCE FOR A PERIOD OF NINE WEEKS, LEARNING ABOUT RESEARCH AND INTERACTING WITH PARKVIEW PHYSICIANS ON ONGOING RESEARCH STUDIES. STUDENTS GAIN BASIC SKILLS FOR THE CONDUCT OF RESEARCH AND DISSEMINATE THEIR WORK THROUGH A POSTER OR PODIUM PRESENTATION AT THE END OF THE PROGRAM. TO PROVIDE OPPORTUNITIES THAT WILL OPEN NEW DOORS AND POTENTIALLY REVOLUTIONIZE HEALTHCARE AND SAVE LIVES, THE PARKVIEW RESEARCH CENTER IS HOUSED WITHIN THE PARKVIEW MIRRO CENTER FOR RESEARCH AND INNOVATION. THIS \$20 MILLION, 84,000-SQUARE-FOOT FACILITY LOCATED ON THE NORTH FORT WAYNE CAMPUS FEATURES MORE SPACE FOR RESEARCH, INNOVATION, AND EDUCATION. EDUCATION TAKES MANY FORMS AT THE PARKVIEW MIRRO CENTER FOR RESEARCH AND INNOVATION. FOR EXAMPLE, THROUGHOUT THE YEAR, MEDICAL PROFESSIONALS IN THE COMMUNITY CAN ATTEND MEDICAL SYMPOSIUMS OFFERED BY THE HOSPITAL'S CONTINUING EDUCATION DEPARTMENT. EDUCATION ALSO TAKES PLACE THROUGH THE ADDITION OF A STATE-OF-THE-ART MEDICAL SIMULATION LAB FEATURING SOME OF THE MOST ADVANCED MEDICAL SIMULATION TECHNOLOGY AVAILABLE TODAY. INDIVIDUAL PHYSICIANS AS WELL AS TEAMS OF CLINICAL PROFESSIONALS TRAIN IN ONE OF THREE LABS EQUIPPED WITH HIGH-FIDELITY MEDICAL MANNEQUINS. THE

**Part VI** Supplemental Information (Continuation)

MEDICAL SIMULATION LAB ALSO FEATURES ADVANCED VIRTUAL REALITY SYSTEMS THAT PROVIDE TRAINING ON ENDOVASCULAR, LAPAROSCOPIC AND PULMONARY PROCEDURES.

AS A STEWARD OF CONTINUING EDUCATION AND IMPROVING HEALTHCARE DELIVERY, PARKVIEW HOSPITAL, INC. VIA THE PARKVIEW MIRRO CENTER FOR RESEARCH AND INNOVATION, FOUND A WAY TO TAKE THE LEARNING EXPERIENCE OFFERED AT THE ADVANCED SIMULATION LAB BEYOND ITS WALLS AND INTO THE COMMUNITY. IN DOING SO, AN AMBULANCE DONATED BY THE WABASH FIRE DEPARTMENT WAS FITTED WITH MEDICAL SIMULATION TECHNOLOGY TO CREATE THE PARKVIEW ADVANCED MOBILE MEDICAL SIMULATION LAB. IT FEATURES HIGH-FIDELITY MANNEQUINS AND A DEDICATED TEAM OF TECHNICIANS WHO ENABLE THE MOBILE UNIT TO SIMULATE REALISTIC CARDIAC EVENTS, AMPUTATION, CRUSH INJURIES, MATERNAL/FETAL ISSUES, AIRWAY, MEDICAL RESCUES AND OTHERS. THIS ADVANCEMENT ALLOWS FOR MORE HEALTHCARE PROVIDERS AND FIRST RESPONDERS IN THE REGION TO DEVELOP AND EXPAND THEIR SKILL SET WITHIN AN INTERACTIVE, SAFE LEARNING ENVIRONMENT.

THE HEALTH SYSTEM CONTINUES TO ENHANCE HEALTHCARE EDUCATION AND MEDICAL RESEARCH THROUGH PARTNERSHIPS BETWEEN PARKVIEW MIRRO CENTER FOR RESEARCH AND INNOVATION AND LOCAL UNIVERSITIES ON THE NORTH FORT WAYNE CAMPUS, AS WELL AS DEVELOPMENT OF THE LIFE SCIENCE EDUCATION AND RESEARCH CONSORTIUM ON THE RANDALLIA CAMPUS. THE CONSORTIUM IS A COLLABORATION BETWEEN THE HOSPITAL, TRINE UNIVERSITY AND HUNTINGTON UNIVERSITY, AND PROVIDES ACADEMIC PROGRAMS AND RESEARCH TIED TO REHABILITATION SERVICES AND SENIOR CARE. IN ADDITION, DOCTORAL PROGRAMS FOR PHYSICAL THERAPY AND OCCUPATIONAL THERAPY ARE OFFERED, THUS ADDRESSING SIGNIFICANT WORKFORCE GAPS AND SPECIALTY CARE ACCESS NEEDS IN THE COMMUNITY.

**Part VI** Supplemental Information (Continuation)

TO KEEP UP WITH THE DEMAND FOR HEALTH SERVICES OF THE CITY'S GROWING DOWNTOWN AREA, \$55 MILLION WAS ALLOCATED TO IMPROVE THE PARKVIEW RANDALLIA CAMPUS. SOME OF THE IMPROVEMENTS INCLUDE AN EXPANDED INTENSIVE CARE UNIT, UPDATED AND REMODELED FAMILY BIRTHING CENTER, STATE-OF-THE-ART OPERATING THEATERS, SERVICE IMPROVEMENTS, CARDIAC CATHETERIZATION LAB AND OTHER RENOVATIONS TO THE FACILITY'S EXTERIOR. CURRENTLY THE PARKVIEW RANDALLIA CAMPUS IS ADDING A 20-BED MEDICAL SURGICAL FLOOR ON ITS SIXTH FLOOR AND AN ADDITIONAL 10-BEDS IN BOTH THE EAST AND SOUTH UNIT OF THE HOSPITAL. THIS PROJECT IS EXPECTED TO BE COMPLETED IN SUMMER 2022.

THE PARKVIEW REGIONAL MEDICAL CENTER CAMPUS IS HOME TO THE PARKVIEW CANCER INSTITUTE, A 108,000 SQ. FT., \$100 MILLION STATE-OF-THE-ART FACILITY USES AN INNOVATIVE PATIENT-CENTERED APPROACH TO CANCER CARE. CARE INCLUDES AN INTERDISCIPLINARY CLINICAL TEAM AND A PERSONAL CARE NAVIGATION PROGRAM. ALL CANCER-RELATED SERVICES ARE UNDER ONE ROOF REGARDLESS OF PATIENT NEEDS RELATED TO PREVENTION, TREATMENT OR AFTERCARE. EXPANSIVE COMMON AREAS WITH INDOOR GARDENS SEPARATE NON-CLINICAL SPACE FROM CLINICAL AREAS, AND INVITE PATIENTS AND THEIR FAMILIES TO TAKE RESPITE HERE.

PARKVIEW REGIONAL MEDICAL CENTER EXPANDED ITS SOUTH TOWER RECENTLY IN RESPONSE TO A GROWING NUMBER OF PEOPLE WHO CONTINUE TO CHOOSE PARKVIEW AS THEIR PREFERRED PROVIDER FOR CARE. THIS \$98 MILLION EXPANSION IS NECESSARY AS PARKVIEW HOSPITAL, INC. HAD INSUFFICIENT INPATIENT BED CAPACITY TO MEET THE GROWING DEMAND. THIS SURPLUS WILL NOT ONLY ALLOW FOR FUTURE EXPANSION PLANS BUT WILL ALSO CONTINUE TO SUPPORT PROJECTED INPATIENT DEMAND AND AMBULATORY CARE GROWTH.

THE EXPANSION CONSISTS OF CONSTRUCTION OF A SIX-STORY, 168,000-SQUARE-FOOT

**Part VI** Supplemental Information (Continuation)

MEDICAL TOWER. THE NEW TOWER WILL ALLOW THE HOSPITAL TO ADD 120 NEW INPATIENT BEDS AND 100 NEW CLINICAL POSITIONS, WITH ROUGHLY 63,000 SQUARE FEET OF ADDITIONAL SPACE. CURRENTLY IN OPERATION ARE THE SIXTH FLOOR (MEDICAL/SURGICAL AND PROGRESSIVE CARE), FIFTH FLOOR (GI/GU/GYN), FOURTH FLOOR (ONCOLOGY), THIRD FLOOR (3 MEDICAL), SECOND FLOOR (NEUROLOGY), FIRST FLOOR (A NEW EMERGENCY DEPARTMENT ENTRANCE AND A PATIENT DISCHARGE LOUNGE) AND THE LOWER LEVEL (MAINTENANCE AREAS).

PARKVIEW HOSPITAL, INC. IS DEDICATED TO THE INVESTMENT OF TIME AND RESOURCES IN THE PROCESS AND CHALLENGES OF IMPROVING THE HEALTH AND WELL-BEING OF THE COMMUNITY. THROUGH OVERSIGHT BY THE COMMUNITY HEALTH IMPROVEMENT COMMITTEE COMPRISED OF COMMUNITY LEADERS, MEMBERS OF THE PARKVIEW HOSPITAL, INC. BOARD OF DIRECTORS AND HOSPITAL MANAGEMENT, THE COMMUNITY HEALTH IMPROVEMENT PROGRAM PROACTIVELY SEEKS TO BUILD COMMUNITY PARTNERSHIPS AND COLLABORATIONS TO PROMOTE HEALTH AND ADDRESS IDENTIFIED COMMUNITY HEALTH NEEDS. OUR GOAL IS TO UTILIZE BEST PRACTICES AND INNOVATIVE METHODS TO IMPROVE HEALTH STATUS, PARTICULARLY FOR THE UNDERSERVED. PARKVIEW HOSPITAL, INC. SUPPORTS THESE COMMUNITY HEALTH IMPROVEMENT EFFORTS THROUGH A COMMITMENT OF UP TO 10 PERCENT OF ITS NET INCOME ON AN ANNUAL BASIS.

SEVERAL LOCAL HEALTH PARTNERS ASSIST IN IMPROVING ACCESS TO HEALTHCARE. MATTHEW 25 HEALTH AND DENTAL CLINIC, NEIGHBORHOOD HEALTH CLINIC, ALLIANCE HEALTH CENTER, NORTHEAST INDIANA POSITIVE RESOURCE CONNECTION (FORMERLY THE AIDS TASK FORCE), A HOPE CENTER (PREGNANCY CENTER), THE RESCUE MISSION (HOMELESS SHELTER) AND BRIGHTPOINT COVERING KIDS AND FAMILIES ARE JUST A FEW OF OUR PARTNER ORGANIZATIONS. ADDITIONALLY, THE HOSPITAL PROVIDES FUNDING TO COMMUNITY TRANSPORTATION NETWORK AS THEY PROVIDE MEDICAL

**Part VI** Supplemental Information (Continuation)

TRANSPORTATION FOR THE SENIOR, DISABLED AND LOW-INCOME POPULATIONS  
THROUGHOUT THE COMMUNITY.

(NARRATIVE CONTINUED AFTER PART VI, LINE 7 CONT'D)

PART VI, LINE 6:

IF THE ORGANIZATION IS PART OF AN AFFILIATED HEALTH CARE SYSTEM, DESCRIBE  
THE RESPECTIVE ROLES OF THE ORGANIZATION AND ITS AFFILIATES IN PROMOTING  
THE HEALTH OF THE COMMUNITIES SERVED.

PARKVIEW HEALTH SYSTEM, INC. (PARKVIEW), A HEALTHCARE SYSTEM SERVING  
NORTHEAST INDIANA AND NORTHWEST OHIO THROUGH OUR HOSPITALS AND PHYSICIAN  
CLINICS, INCLUDES THE NOT-FOR-PROFIT HOSPITALS OF PARKVIEW HOSPITAL, INC.;  
COMMUNITY HOSPITAL OF LAGRANGE COUNTY, INC.; COMMUNITY HOSPITAL OF NOBLE  
COUNTY, INC.; DEKALB MEMORIAL HOSPITAL, INC.; HUNTINGTON MEMORIAL  
HOSPITAL, INC.; PARKVIEW WABASH HOSPITAL, INC.; WHITLEY MEMORIAL HOSPITAL,  
INC.; PARK CENTER, INC.; AS WELL AS 60 PERCENT OWNERSHIP IN THE JOINT  
VENTURE OF ORTHOPEDIC HOSPITAL AT PARKVIEW NORTH, LLC.

EACH HOSPITAL ENTITY ENGAGES IN COMMUNITY OUTREACH ACTIVITIES AND SUPPORTS  
THEIR RESPECTIVE COUNTY THROUGH INVESTMENTS OF COMMUNITY HEALTH  
IMPROVEMENT FUNDING AND PROGRAMMING CUSTOMIZED TO MEET THE UNIQUE HEALTH  
NEEDS OF THEIR RESPECTIVE COMMUNITIES. AFFILIATE HOSPITALS ALSO WORK  
TOGETHER AND SHARE PROGRAMMING AND MESSAGING WHERE COMMON COMMUNITY HEALTH  
ISSUES ARE IDENTIFIED. FROM THE LIST OF HEALTH ISSUES IDENTIFIED IN  
NORTHEAST INDIANA AS PART OF THE 2019 COMMUNITY HEALTH NEEDS ASSESSMENT,  
THE HEALTH PRIORITY OF SUBSTANCE USE DISORDER/MENTAL HEALTH PROMOTION WAS  
SELECTED BY ALL AFFILIATE HOSPITALS.

**Part VI** Supplemental Information (Continuation)

AFFILIATE HOSPITALS EACH HAVE A LOCAL BOARD OF DIRECTORS. PARKVIEW HEALTH SYSTEM, INC. ALSO ENGAGES A BOARD OF DIRECTORS, WHICH CONSISTS OF REPRESENTATION FROM EACH OF THE AFFILIATE HOSPITAL BOARDS AND UP TO 15 AT-LARGE PHYSICIANS OR COMMUNITY LEADERS. MOST OF THE BOARD OF DIRECTORS SHALL, AT ALL TIMES, BE CONSIDERED TO BE INDEPENDENT AS DEFINED BY THE INTERNAL REVENUE SERVICE.

PARKVIEW CONTRIBUTES TO THE OVERALL SUCCESS OF THE REGION THROUGH SIGNIFICANT INVOLVEMENT IN THE COMMUNITIES WE SERVE. BY DEVELOPING VARIOUS PARTNERSHIPS AND ALIGNMENTS WITH DIFFERENT SECTORS AND ORGANIZATIONS, PARKVIEW HELPS TO PROMOTE THE ECONOMY, QUALITY OF LIFE AND HEALTH/WEELL-BEING ACROSS THE REGION. WITH A CONSISTENT FOCUS ON OUR MISSION AND VISION, WE WORK TO PROVIDE THE BEST CARE TO EVERY PERSON, EVERY DAY IN OUR FACILITIES WHILE SERVING AS GOOD STEWARDS OF SURPLUS FUNDS IN AN EFFORT TO POSITIVELY IMPACT COMMUNITY HEALTH STATUS.

PART VI, LINE 7, LIST OF STATES RECEIVING COMMUNITY BENEFIT REPORT:  
IN

PART VI, LINE 7 CONT'D:

A COPY OF FORM 990, SCHEDULE H IS FILED WITH THE INDIANA STATE DEPARTMENT OF HEALTH.

PART VI, SUPPLEMENTAL INFORMATION, LINE 5, CONT'D

CONTINUED FROM ABOVE: PROVIDE ANY OTHER INFORMATION IMPORTANT TO DESCRIBING HOW THE ORGANIZATION'S HOSPITAL FACILITIES OR OTHER HEALTH CARE FACILITIES FURTHER ITS EXEMPT PURPOSE BY PROMOTING THE HEALTH OF

**Part VI** Supplemental Information (Continuation)

THE COMMUNITY (E.G. OPEN MEDICAL STAFF, COMMUNITY BOARD, USE OF SURPLUS FUNDS, ETC.).

INITIATIVES ADDRESSING THE HOSPITAL'S CURRENT HEALTH PRIORITIES INCLUDE SCHOOL-BASED NUTRITION AND ACTIVE LIFESTYLE CURRICULUMS/PROGRAMS; PARKVIEW'S COMMUNITY GREENHOUSE AND LEARNING KITCHEN PROGRAMMING; MATERNAL/INFANT INTERVENTION PROGRAMS; AND A BEHAVIORAL HEALTHCARE NAVIGATOR PROGRAM. THE HOSPITAL ALSO FUNDS AND MANAGES AN INTEGRATED COMMUNITY-BASED NURSING PROGRAM. THESE REGISTERED NURSES, ALONG WITH A REGISTERED RESPIRATORY THERAPIST AND COMMUNITY HEALTH WORKERS, DELIVER EDUCATION AND SERVICES OUTSIDE THE WALLS OF OUR FACILITIES TO ADDRESS COMMUNITY HEALTH ISSUES, ENGAGE VULNERABLE FAMILIES AND PROMOTE HEALTH IN POPULATIONS WHO ARE OTHERWISE UNDERSERVED BY THE TRADITIONAL HEALTHCARE SYSTEM. OTHER COMMUNITY OUTREACH PROGRAMS INCLUDE MEDICATION ASSISTANCE, MOBILE MAMMOGRAPHY SERVICES, PEDIATRIC CARE MOBILE UNIT AND INJURY PREVENTION EDUCATION.

AS A PART OF PROMOTING HEALTHY LIVING, THE HEALTHY EATING ACTIVE LIVING (HEAL) INITIATIVE WAS DEVELOPED AS A COLLABORATION BETWEEN PARKVIEW HOSPITAL, INC., AND ST. JOSEPH COMMUNITY HEALTH FOUNDATION. IT CONSISTS OF THREE COMPONENTS, INCLUDING 1) OUR HEALING KITCHEN, A HEALTHY FOOD PREPARATION COURSE, 2) THE OPERATION OF MULTIPLE HEAL FARMERS MARKETS, WHERE SNAP AND WIC/SENIOR VOUCHERS ARE DOUBLED, AND 3) SUPPORT OF THE GATE (GROWTH IN AGRICULTURE THROUGH EDUCATION) URBAN GARDEN. THE HEAL PROGRAM ADDRESSES FOOD INSECURITY IN FOOD DESERT NEIGHBORHOODS ACROSS ALLEN COUNTY BY IMPROVING ACCESS TO FRESH, LOCAL PRODUCE AND PROVIDING EDUCATION ON FOOD PREPARATION AND PRESERVATION.



**Part VI** Supplemental Information (Continuation)

THE PARKVIEW GREENHOUSE AND LEARNING KITCHEN IS LOCATED ON THE PARKVIEW BEHAVIORAL HEALTH INSTITUTE CAMPUS, WHICH IS A FEDERALLY DESIGNATED FOOD DESERT AREA. THIS FACILITY SERVES AS A HUB FOR PARKVIEW'S NUTRITION-RELATED OUTREACH EDUCATION PROGRAMS AND THE VEGGIERX PRODUCE PRESCRIPTION PROGRAM. THE PARKVIEW COMMUNITY GREENHOUSE AND LEARNING KITCHEN OFFERS FOOD TASTINGS, COOKING DEMONSTRATIONS AND HANDS-ON COOKING CLASSES, WHICH SERVE TO EDUCATE COMMUNITY MEMBERS ON WAYS TO SHOP FOR, PREPARE, STORE AND USE FRESH FOODS. CLASSES ARE TYPICALLY HELD WEEKLY AND ARE PROVIDED AT NO COST TO THE COMMUNITY. THE VEGGIERX PRODUCE PRESCRIPTION PROGRAM PROMOTES ACCESS TO HEALTHY FOODS FOR INDIVIDUALS IDENTIFIED AS FOOD INSECURE OR FOR UNDERSERVED COMMUNITY MEMBERS WITH CHRONIC DISEASE. VEGGIERX PROGRAM PARTICIPANTS ARE PROVIDED PRODUCE VOUCHERS THAT CAN BE USED AT LOCAL FARM MARKETS AS WELL AS HEALTHY LIVING EDUCATION, FOOD PREPARATION GUIDANCE, AND RECIPES.

THE YEAR OF 2021 PRESENTED PARKVIEW HEALTH SYSTEM, INC. WITH MANY NEW CHALLENGES WITH THE SPREAD OF COVID-19 THROUGHOUT THE UNITED STATES. PARKVIEW HOSPITAL, INC. WAS AT THE CENTER OF THIS EFFORT ALONG WITH PARKVIEW HEALTH SYSTEM, INC., TREATING 70% OF THE REGIONS TOTAL COVID-19 PATIENT POPULATION. HOWEVER, BECAUSE OF THE HEALTH SYSTEM'S GROWTH AND PREPAREDNESS FOR SUCH TRYING TIMES, PARKVIEW WAS ABLE TO STEP UP AND OFFER MANY ADDITIONAL RESOURCES TO THE COMMUNITY.

AS THE REGION'S LARGEST EMPLOYER, PARKVIEW HEALTH UNDERSTANDS THE COMPLEXITY OF MAINTAINING NORMAL BUSINESS OPERATIONS DURING A PANDEMIC. TO HELP, PARKVIEW DEVELOPED A PLATFORM TITLED BUSINESS CONNECT, WHICH IS A RESOURCE FOR AREA EMPLOYERS AND COMMUNITY PARTNERS TRYING TO MEET

**Part VI** Supplemental Information (Continuation)

THE CHALLENGES BROUGHT BY COVID-19 WHILE PROTECTING THEIR EMPLOYEES' HEALTH AND SAFETY. BUSINESS CONNECT SHARES BEST PRACTICES, VALUABLE RESOURCES AND UP-TO-DATE GUIDANCE NEEDED TO OPERATE YOUR BUSINESS.

IN 2021, PARKVIEW HELD 16 COMMUNITY-BASED COVID-19 VACCINE CLINICS TARGETING VULNERABLE POPULATIONS. PARKVIEW ALSO ESTABLISHED TWO TEMPORARY COMMUNITY VACCINE CLINICS AVAILABLE AT THE PARKVIEW MIRRO CENTER FOR RESEARCH AND INNOVATION AND AT THE FIRST CARE CLINIC ON NEW VISION DRIVE. THESE CLINICS WERE SET UP WITH AREAS FOR SYMPTOM SCREENING, REGISTRATION, VACCINATION, AND POST-INJECTION OBSERVATION. TOGETHER, THESE LOCATIONS DELIVERED A TOTAL OF 155,202 VACCINES. PARKVIEW ALSO OFFERED SEVERAL POP-UP CLINICS WITHIN ALLEN COUNTY THAT DELIVERED 610 VACCINES. OTHER CLINICS A PART OF NORMAL OPERATIONS (PPG AND OCCUPATIONAL HEALTH) DELIVERED 6,115 VACCINES.

PARKVIEW HOSPITAL WAS AWARDED THE FOLLOWING ACCOLADES DURING 2021:

APRIL 2021 - PARKVIEW HEALTH ACHIEVES ACCREDITATION FROM METABOLIC AND BARIATRIC SURGERY ACCREDITATION AND QUALITY IMPROVEMENT PROGRAM (MBSAQIP), A JOINT EFFORT OF THE AMERICAN COLLEGE OF SURGEONS (ACS) AND THE AMERICAN SOCIETY FOR METABOLIC AND BARIATRIC SURGERY (ASMBS).

PARKVIEW'S BARIATRIC SURGERY PROGRAM OPERATES UNDER PARKVIEW PHYSICIANS GROUP (PPG) - WEIGHT MANAGEMENT AND BARIATRIC SURGERY, AND PROCEDURES ARE COMPLETED AT PARKVIEW REGIONAL MEDICAL CENTER.

JUNE 2021 - PARKVIEW HEALTH HOSPITALS RECOGNIZED WITH NATIONAL SAFE SLEEP HOSPITAL CERTIFICATION BY THE NATIONAL SAFE SLEEP HOSPITAL CERTIFICATION PROGRAM FOR THEIR COMMITMENT TO BEST PRACTICES AND

**Part VI** Supplemental Information (Continuation)

EDUCATION ON INFANT SAFE SLEEP.

PART V, SECTION B, LINE 19:

DISCLOSURE STATEMENT FOR CORRECTION SECTION 501(R) OMISSIONS, ERRORS  
AND OTHER FAILURES PURSUANT TO INTERNAL REVENUE SERVICE REVENUE  
PROCEDURE 2015-21.

IN JANUARY AND FEBRUARY 2021, THE ORGANIZATION'S INTERNAL AUDIT  
DEPARTMENT PERFORMED A COMPREHENSIVE REVIEW OF ALL APPLICABLE POLICIES  
AND PRACTICES UNDER SECTION 501(R) OF THE INTERNAL REVENUE CODE AND THE  
TREASURY REGULATIONS ISSUED THEREUNDER. THE AUDIT PERIOD WAS AUGUST 1,  
2020, THROUGH DECEMBER 31, 2020. AS A RESULT OF THE AUDIT, MINOR  
POLICY CHANGES WERE MADE, AND MINOR PROCEDURAL CHANGES RELATED TO  
SECTION 501(R) COMPLIANCE WERE IMPLEMENTED.

ALSO, IT WAS DETERMINED THAT 292 PATIENT ACCOUNTS WERE PRESUMPTIVELY  
DETERMINED TO BE ELIGIBLE FOR LESS-THAN-100% FINANCIAL ASSISTANCE, WERE  
NOT NOTIFIED REGARDING THE WAY TO APPLY FOR MORE GENEROUS ASSISTANCE  
UNDER THE FAP AND WERE INADVERTENTLY SUBJECT TO ADVERSE CREDIT  
REPORTING. THE ADVERSE CREDIT REPORTING, HOWEVER, WAS IMMEDIATELY  
REMOVED IN MAY 2021. IN ADDITION TO THE FINANCIAL ASSISTANCE  
NOTIFICATION ON ALL PATIENT STATEMENTS, THE HOSPITAL FACILITY  
INSTITUTED PROCEDURES TO PROVIDE WRITTEN NOTICE TO PATIENTS WHO RECEIVE  
PARTIAL PRESUMPTIVE FINANCIAL ASSISTANCE THAT INFORMS THE INDIVIDUAL  
REGARDING THE BASIS FOR THE PRESUMPTIVE FAP ELIGIBILITY DETERMINATION  
AND THE WAY TO APPLY FOR MORE GENEROUS ASSISTANCE DURING THE  
APPLICATION PERIOD.